

Payment Accuracy Tips by Category
January 2000 - September 2004

APPLICATION AND REVIEW PROCESSING

- 092104 IF THE INITIAL MONTHS OF A FS APPLICATION ARE ISSUED AS SUPPLEMENTS, THEN THE WORKER MUST GO TO AGOR AND MOVE THE FS REVIEW DATE BACK. CARES WILL SET A 12-MONTH REVIEW DATE STARTING WITH THE FIRST MONTH FOR WHICH CARES DETERMINES ELIGIBILITY. THE TOTAL CERTIFICATION PERIOD INCLUDING THE SUPPLEMENT MONTHS CANNOT EXCEED 12. THIS IS ESSENTIAL TO ASSURE THE SMRF IS GENERATED APPROPRIATELY AND PROCESSED PRIOR TO MONTH SEVEN. [Reference Operations Memo 04-27](#)
- 052804 THE CLIENT MUST BE ALLOWED 10 DAYS TO VERIFY INFORMATION AT REVIEW AND 30 DAYS AT APPLICATION. IF AN APPLICATION IS PROCESSED USING ASER (FOR EXAMPLE, A NEW FS REQUEST WHEN OTHER PROGRAMS ARE OPEN) CARES WILL ONLY ALLOW 10 DAYS FOR VERIFICATION. BE SURE TO CHANGE THE DUE DATE ON AGVC/AGEV TO ALLOW 30 DAYS FOR VERIFICATION. KEEP IN MIND THAT AT APPLICATION THE CLIENT HAS TO BE GIVEN AT LEAST 10 DAYS FOR VERIFICATION. THIS MEANS THAT THE VERIFICATION DUE DATE COULD EXTEND BEYOND THE 30 DAYS IF THE APPLICATION INTERVIEW IS NOT HELD PRIOR TO THE 10TH DAY OF THE APPLICATION PROCESSING PERIOD. [Reference FSHB Appendix 21.01.00](#). [Reference FSHB Chapter 2.1.2](#)
- 042804 IF THE CLIENT COMPLETES A REVIEW AFTER ADVERSE ACTION IN THE MONTH THE REVIEW IS DUE, A NEW APPLICATION IS NOT REQUIRED. IF THE REVIEW WAS STARTED IN THE REVIEW MONTH BUT VERIFICATIONS PEND UNTIL THE NEXT MONTH, THIS IS STILL A REVIEW. IF THE REVIEW IS HELD IN THE NEXT MONTH DUE TO AN AGENCY DELAY, IT IS STILL A REVIEW. YOU MUST DOCUMENT THE REASON FOR THE DELAY IN CASE COMMENTS AND USE THE FIRST OF THE MONTH AS THE OVERRIDE DATE ON ACPA. REMEMBER THE CLIENT MUST BE GIVEN 10 DAYS TO PROVIDE ANY VERIFICATIONS. OTHERWISE, ONCE THE LAST DAY OF THE REVIEW MONTH PASSES, THIS IS A NEW APPLICATION. A NEW FILING DATE MUST BE ESTABLISHED AND A FACE-TO-FACE INTERVIEW MUST TAKE PLACE. [Reference FSHB Chapter 2.2.1.4](#)
- 041404 IF A FOODSHARE CASE IS CLOSED FOR EVEN ONE DAY, THIS IS CONSIDERED A NEW APPLICATION. A NEW FILING DATE MUST BE ESTABLISHED AND A NEW FACE TO FACE INTERVIEW MUST TAKE PLACE. YOU MUST ALSO RE-VERIFY ALL MANDATORY VERIFICATION ITEMS, INCLUDING RESIDENCE, EARNED INCOME, UNEARNED INCOME AND EXPENSES. [Reference FSHB Chapter 2.1.1.3](#)
- 021904 WHEN THE DATES ON ACPA ARE UPDATED ON A CLOSED FOODSHARE CASE, THE WORKER IS INDICATING A NEW FS APPLICATION IS BEING PROCESSED. CARES WILL DETERMINE FS ELIGIBILITY USING THE UPDATED DATE AS THE FILING DATE. IT IS VITAL THAT IF THERE IS NOT A REQUEST FOR FS, THAT AN "N" IS ENTERED ON THE FS ACPA AS WELL AS FOR ALL INDIVIDUALS IN THE HOME. INDICATE IN CASE COMMENTS THAT THERE WAS NOT A REQUEST FOR FS. IF YOU HAVE TO UPDATE THE DATES ON A CLOSED FOODSHARE CASE BECAUSE YOU ARE RECEIVING THE "CAN'T RUN FOR MORE THAN 9 MONTHS LIVE" EDIT, THE Y'S REQUESTING FOODSHARE BENEFITS SHOULD BE CHANGED TO N'S FOR THE CASE AND ALL INDIVIDUALS. USE CASE COMMENTS TO INDICATE WHY THE CHANGE WAS MADE. [Reference FSHB Chapter 2.1.1.4](#)

- 021704 CASES ARE BEING SELECTED IN THE QC SAMPLE WHERE THERE WAS NEVER A LEGAL FS APPLICATION. THIS HAPPENS WHEN ACPA IS INCORRECTLY CODED WITH A "Y" FOR FS WITH A CURRENT OVERRIDE DATE. IF THE HOUSEHOLD IS NOT APPLYING FOR FS AND NO FACE-TO-FACE INTERVIEW IS COMPLETED, DO NOT UPDATE THE OVERRIDE DATES ON ACPA FOR FS. PLEASE ENSURE ACPA IS CODED WITH A "N" FOR THE QUESTION THAT ASKS IF THEY ARE REQUESTING THIS PROGRAM OF ASSISTANCE AND ALSO ENTER AN "N" FOR EACH INDIVIDUAL LISTED.
- 020404 THIS IS A REMINDER THAT IF A CASE IS OPEN FOR ANY OTHER PROGRAM, AND REQUESTS FOODSHARE BENEFITS, IT IS CONSIDERED AN APPLICATION AND THE CLIENT IS GIVEN 30 DAYS TO VERIFY ANY OUTSTANDING ITEMS. AGVC/AGEV MAY NEED TO BE ALTERED TO ALLOW THE FULL 30 DAYS FOR FOODSHARE. CARES CURRENTLY WILL SET A VERIFICATION DUE DATE IN 10 DAYS RATHER THAN 30 WHEN ANOTHER PROGRAM OF ASSISTANCE IS OPEN AND FOODSHARE IS REQUESTED. ALSO, IF A CASE IS CLOSED FOR 1 DAY, IT IS CONSIDERED A NEW APPLICATION AND A NEW FILING DATE MUST BE SET BY FORM 16019A & B OR A SIGNED CAF ON THE DATE OF REQUEST. A FACE TO FACE INTERVIEW IS REQUIRED IN BOTH OF THESE INSTANCES. **Reference FSHB Chap. 2.1.2 and 2.1.1.3**
- 090303 IT IS VERY IMPORTANT THAT THERE IS A SIGNED FOODSHARE APPLICATION FORM ON FILE FOR EACH AND EVERY OPEN FOODSHARE CASE FOR ITS CURRENT CERTIFICATION PERIOD. IF THERE IS NOT A SIGNED CAF FOR THE CURRENT CERTIFICATION PERIOD, QA MUST LOOK AT THE CASE DIFFERENTLY, BASED ON FNS REGULATIONS. IT IS IMPORTANT THAT A SIGNED SIGNATURE PAGE EXISTS IN THE FILE, EITHER THE CAF OR A BACKUP SIGNATURE PAGE IF YOU ARE UNABLE TO PRINT THE CAF FROM CARES. SEE FORMS HCF 16019 A & B FOR PAPER APPLICATION FORM. **Reference FSHB Chap. 2.1.1.2 and 8.3.2**
- 032603 IF A CASE IS CLOSED FOR 1 DAY OR MORE, THE HCF 16019A 1 PAGE APPLICATION FOR FOODSHARE IS NEEDED. THIS MEANS THAT IF AN INDIVIDUAL IS CURRENTLY RECEIVING ONLY MA BENEFITS AND WISHES TO REQUEST FOODSHARE, A FILING DATE IS ESTABLISHED BY FILLING OUT THE HCF 16019A. THIS FILING DATE IS THE DATE THAT IS ENTERED ON ACPA IN CARES FOR THE PROGRAM BEING REQUESTED. THE 1 PAGE APPLICATION FORM IS VERY IMPORTANT IN ESTABLISHING THE FILING DATE, AS IT IS CONSIDERED A NEW APPLICATION WHEN A CASE IS CLOSED FOR FOODSHARE FOR 1 DAY OR MORE. **Reference FSHB Chap. 2.1.1.2 and 8.3.2**
- 011503 VERIFICATION OF THE IDENTITY OF THE PRIMARY PERSON IS REQUIRED AT APPLICATION. THIS IS THE ONLY VERIFICATION MANDATORY FOR ELIGIBLE HOUSEHOLDS TO RECEIVE EXPEDITED BENEFITS. **Reference FSHB Chap. 2.1.4.2** IDENTITY MAY BE VERIFIED WITH A PHOTO ID, HOWEVER OTHER SOURCES ARE ACCEPTABLE. SEE ALSO THE INS TRAVEL AND IDENTITY DOCUMENTS: [HTTP://WWW.DWD.STATE.WI.US/DWS/ONSPI/PDF/TRAVELANDIDENTITYDOCS.COM](http://www.dwd.state.wi.us/dws/onspi/pdf/travelandidentitydocs.com) PAMPHLET FOR NON-CITIZEN DOCUMENTATION. SEE ALSO CHART 2 OF THE ALIEN ELIGIBILITY SECTION OF **FSHB Chap. 3.12.1.1 and 8.3.2**
- 11 27 02 REQUESTS FOR VERIFICATION MUST BE MADE IN WRITING. VERBAL REQUESTS ARE NOT ACCEPTABLE AND WILL NOT STAND UP IN A FAIR HEARING. WORKERS ARE REQUIRED TO GIVE THE CUSTOMER NOTICE REGARDING REQUIRED VERIFICATION, WHEN IT IS DUE TO THE AGENCY, AND THE CONSEQUENCES OF NOT VERIFYING TIMELY. REMEMBER TO CHANGE SCREEN AGVC TO A "Y" FOR A NIGHTLY GENERATED NOTICE OR A 'P' FOR A LOCALLY PRINTED NOTICE. **Reference FSHB Chap. 2.1.1.4.1 and 8.3.2**

- 08 05 02 REQUESTS FOR VERIFICATION MUST BE MADE IN WRITING. VERBAL REQUESTS ARE NOT ACCEPTABLE AND WILL NOT STAND UP IN A FAIR HEARING. WORKERS ARE REQUIRED TO GIVE THE CUSTOMER NOTICE REGARDING REQUIRED VERIFICATION, WHEN IT IS DUE TO THE AGENCY, AND THE CONSEQUENCES OF NOT VERIFYING TIMELY. REMEMBER TO CHANGE SCREEN AGVC TO A 'Y' FOR A NIGHTLY GENERATED NOTICE OR A 'P' FOR A LOCAL PRINTED NOTICE. [Reference FSHB Chap. 2.1.1.4.1 and 8.3.2](#)
- 04 18 02 THE CLIENT MUST SIGN AN EBT CARD AND PIN RESPONSIBILITY STATEMENT AT FOODSHARE APPLICATION. IF THEY CLOSE AND RE-OPEN, A NEW STATEMENT MUST BE DISCUSSED AND SIGNED. THE WORKER SHOULD ALSO PROVIDE THE EBT BROCHURE AND REVIEW IT AT EACH APPLICATION TO DETERMINE IF THE CLIENT IS HAVING ANY PROBLEMS AND TO ENSURE THEY HAVE THE CSI CUSTOMER SERVICE NUMBER IF THEY EVER LOSE THEIR CARD. IF THE CLIENT UNDERSTANDS EBT AND HAS BEEN USING THE CARD WITH NO PROBLEMS, THEY DON'T NEED TO VIEW THE EBT VIDEO AGAIN. IF THE CLIENT REFUSES TO SIGN THE STATEMENT, DO NOT DENY FS. DOCUMENT THE REFUSAL ON CMCC. [Reference FSHB EBT Chap. 24.02.18.04.01](#)
- 03 06 02 WORKERS ARE REQUIRED TO GIVE THE CUSTOMER A COPY OF THE "ADDENDUM TO APPLICATION" AT EACH APPLICATION AND REVIEW. THE WORKER MUST EXPLAIN THE ADDENDUM TO THE CUSTOMER AND HAVE THE CUSTOMER INITIAL THE LINE ON THE SIGNATURE PAGE OF THE CAF WHICH STATES THAT THEY HAVE RECEIVED AND UNDERSTAND THE ADDENDUM. [Reference FSHB Chap. 2.1.1.2 and Operations Memo 03-73](#)
- 02 20 02 IF A CASE IS OPEN FOR OTHER PROGRAMS AND THE FOODSHARE HAS BEEN CLOSED FOR LESS THAN 41 DAYS, THE FS X CATEGORY IS NOT CREATED AND THE AG 'MIGHT ERRONEOUSLY' RE-OPEN WITHOUT AN APPLICATION WHEN A CHANGE IS ENTERED THAT MAKES THE HOUSEHOLD ELIGIBLE FOR FS. BECAUSE AN INTERRUPTION IN FS BENEFITS FOR EVEN 1 DAY REQUIRES A NEW APPLICATION, WORKERS SHOULD PAY CLOSE ATTENTION TO WHETHER THE FS BENEFITS ARE CONTINUOUS IF THE CASE HAS NOT BEEN CLOSED FOR 41+ DAYS. IF THE FS BENEFITS ARE NOT CONTINUOUS, THE CLIENT MUST SIGN AN APPLICATION REGISTRATION FOR FOODSHARE PART 1 TO SET THEIR FILING DATE. THE WORKER COMPLETES A NEW APPLICATION AND THE FS OPEN AS OF THE NEW FILING DATE. [Reference FSHB Chap. 2.1.1.3](#)
- 01 03 02 IF AN INDIVIDUAL MOVES TO WISCONSIN FROM ANOTHER STATE, THE WORKER MUST DETERMINE THE BEGIN DATE FOR FS ELIGIBILITY IN WISCONSIN. IF THE LAST FS ALLOTMENT WAS ISSUED IN THE MONTH PRIOR TO THE APPLICATION DATE, ELIGIBILITY BEGINS ON THE APPLICATION DATE. IF THE LAST FS ALLOTMENT WAS ISSUED IN THE MONTH OF APPLICATION, ELIGIBILITY BEGINS ON THE FIRST OF THE MONTH FOLLOWING THE APPLICATION DATE. AN EXCEPTION TO THIS RULE OCCURS WHEN THE PERSON MOVES TO WISCONSIN FROM A STATE THAT ISSUES FS ON A FISCAL MONTH BASIS AND FOR MIGRANT HOUSEHOLDS. [Reference FSHB Chap. 3.4.1](#)
- 121201 WHEN A REQUEST FOR FS IS FILED FOR AN ONGOING CASE IN WHICH THERE HAS BEEN A BREAK IN SERVICE, THE FS REQUEST IS PROCESSED IN THE SAME MANNER AS AN INITIAL APPLICATION. THIS INCLUDES PRIORITY SERVICE TESTING. THE DETERMINATION IS SUBJECT TO THE 30-DAY PROCESSING STANDARDS. [Reference FSHB Chap. 2.1.1.3, 2.1.4.1 and 8.3.2](#)

- 011801 WHEN COMPLETING A REVIEW CHANGE THE EFFECTIVE MMYR ON EACH ACPA SCREEN. CHANGE THE OVERRIDE DATE OF THE PROGRAMS THEY ARE REQUESTING ASSISTANCE IN TO THE DATE YOU ARE COMPLETING THE REVIEW. THIS PROCESS DOCUMENTS THAT YOU HAVE ASKED YOUR CUSTOMER IF HE/SHE WANTS TO APPLY FOR EACH PROGRAM OF ASSISTANCE ON THE ACPA SCREENS.
- 111500 A SIGNED CAF IS REQUIRED FOR ALL REVIEWS. ON A PHONE-IN REVIEW, MAIL THE CAF AND A 10-DAY NOTICE TO THE CUSTOMER. IF THE SIGNED CAF IS NOT RETURNED IN 10 DAYS, CLOSE THE CASE WITH AN OVERRIDE ON AGOE USING CODE 045 OR 077. [Reference FSHB Chap. 2.1.3.7](#)
- 110100 WHEN DOING AN APPLICATION OR REVIEW, WORKERS SHOULD USE THE MOST RECENT CHECK STUBS TO COMPUTE THE PROSPECTIVE INCOME AMOUNT. USE THE CHECKSTUBS RECEIVED IN THE LAST 30 DAYS OR MORE. IF OVERTIME IS ON THE CHECKSTUB, USE THE OVERTIME WHEN YOU COMPUTE THE INCOME CALCULATION IF IT IS REGULAR AND PREDICTABLE. [Reference FSHB Chap. 1.2.4.2 and 8.3.4](#)
- 072600 WHEN AN FS ASSISTANCE GROUP CLOSES FOR ANY PERIOD OF TIME, EVEN ONE DAY, THE FS GROUP MUST REAPPLY. REMEMBER, THE FILING DATE IS THE DAY A SIGNED APPLICATION IS RECEIVED. THE ONE PAGE APP (FORM DES 11605) MAY BE USED IN LIEU OF A COMPLETED CAF TO SET THE FILING DATE. FOODSHARE BENEFITS ARE ISSUED PRORATED FROM THE FILING DATE. MAKE SURE ACPA HAS THE CORRECT FILING DATE FOR ALL ASSISTANCE GROUPS AT APPLICATION. [Reference FSHB Chap. 2.1.1.3](#)
- 022300 THIS IS A REPEAT OF AN EARLIER QC TIP, BUT WE'RE STILL FINDING LOTS OF ERRORS ON THIS. WHEN A FS ASSISTANCE GROUP CLOSES FOR ANY PERIOD OF TIME, EVEN ONE DAY, THE FS GROUP MUST REAPPLY. REMEMBER THAT THE FILING DATE IS THE DAY A SIGNED APPLICATION IS RECEIVED. PAGE 1 OF THE CAF MAY BE USED IN LIEU OF A COMPLETED CAF TO SET THE FILING DATE. FOODSHARE BENEFITS ARE ISSUED PRORATED FROM THE FILING DATE. MAKE SURE ACPA HAS THE CORRECT FILING DATE FOR ALL ASSISTANCE GROUPS AT APPLICATION, ESPECIALLY THE NEW FILING DATE FOR FOODSHARE. [Reference FSHB Chap. 2.1.1.3](#)

HOUSEHOLD COMPOSITION/FOOD UNIT/FOOD GROUP

- 050703 IF SOMEONE IS REPORTED TO HAVE MOVED OUT OF THE HOME, TRAN TO ANLA, CODE THE PERSON AS A '15' AND ENTER THE DATE THAT THIS ARRANGEMENT OCCURRED. RUN SFEX/D. THEN GO BACK TO ANID AND DELETE THE PERSON FROM THE CASE AND RUN SFEX/D AGAIN. REMEMBER TO ALWAYS CHECK THE EESI AND EEIE TO BE SURE ALL HOUSEHOLD MEMBERS THAT SHOULD BE INCLUDED ARE INCLUDED IN THE BENEFIT AND THAT THE BENEFIT CALCULATIONS ARE CORRECT.
- 042303 THE FAMILY GROUP MUST CONSIST OF ANY ADULT CHILDREN UNDER THE AGE OF 22 THAT RESIDE WITH HIS/HER NATURAL, ADOPTIVE OR STEPPARENT. THIS MEANS THAT ADULT CHILDREN UNDER 22 CAN NOT REQUEST SEPARATE FOOD UNITS FROM HIS/HER PARENT WHEN RESIDING TOGETHER. INCLUDE ALL HOUSEHOLD MEMBERS ON ANID WHEN APPROPRIATE. [Reference FSHB Chap. 3.3.1.2](#)

- 071002 PUT THE FOLLOWING IN THE SAME FOOD UNIT, EVEN IF THEY DON'T PURCHASE AND PREPARE MEALS TOGETHER:
1. SPOUSES AND SPOUSES.
 2. ADULT CHILDREN UNDER THE AGE OF 22 WHO ARE LIVING WITH HIS OR HER NATURAL, ADOPTIVE, OR STEP-PARENT.
 3. PARENTS AND MINOR CHILDREN.
 4. ADULTS AND MINOR CHILDREN UNDER THE AGE OF 18 YEARS OVER WHOM THEY ARE EXERCISING PARENTAL CONTROL. SEE DEFINITION OF PARENTAL CONTROL AT [Chap. 3.3.1.1](#). [Reference FSHB Chap. 3.3.1.2](#)
- 110901 REMEMBER TO ADEQUATELY VERIFY AND DOCUMENT ALL REQUIRED INFORMATION NEEDED FOR A PERSON ADD. SUPPLEMENTS FOR PERSON ADDITIONS SHOULD ALWAYS BE ISSUED TIMELY. [Reference FSHB Chap. 8.3.12](#)
- 082400 IF A HOUSEHOLD CLAIMS SEPARATE FOOD GROUPS AND YOU HAVE ASKED THE QUESTION ABOUT PURCHASING AND PREPARING FOOD SEPARATELY FROM OR TOGETHER WITH OTHER PERSONS LIVING IN THE HOUSEHOLD, YOU MUST DOCUMENT THE ANSWER IN CASE COMMENTS. YOUR CASE COMMENTS SHOULD REFLECT WHAT WAS SAID BY YOUR CUSTOMER OR STATE IF THERE IS SIGNED FORM IN THE CASE RECORD. REMEMBER TO DOCUMENT IN CASE COMMENTS AT THE TIME OF INITIAL APPLICATION AND AGAIN AT EACH REVIEW. [Reference FSHB Chap. 3.3.1](#)

ALIENS/CITIZENSHIP

- 031203 IT IS IMPORTANT TO ASK AT EACH CERTIFICATION WHETHER AN ALIEN HAS BECOME A CITIZEN. IF THE PERSON ADMITTED TO THIS COUNTRY HAS BECOME A CITIZEN, THEY POTENTIALLY WILL REMAIN OR REGAIN ELIGIBILITY FOR FEDERAL FOOD STAMPS VS. STATE FOODSHARE BENEFITS. THE DXSX SCREEN NOW HAS A FIELD THAT INDICATES CITIZEN/ALIEN STATUS. IT IS LOCATED IN THE TOP CENTER OF THE SCREEN FOR THOSE INDIVIDUALS THAT ARE ELIGIBLE FOR SSI. THE VALUES OF THIS CODE ARE FOUND AT TABLE TDAS. PLEASE PAY SPECIAL ATTENTION TO THE CODING OF ALL CASES INVOLVING ALIENS AND BE SURE TO UPDATE ANDA AND ANAR ACCORDINGLY. [Reference FSHB Chap. 3.12.1 and Operations Memo 04-10](#)
- 021203 A LEGAL ALIEN IS NOT ELIGIBLE FOR FS UNTIL S/HE BECOMES A CITIZEN, UNLESS THEY MEET ONE OF THE CRITERIA IN CHART 1 OF THE ALIEN ELIGIBILITY SECTION OF [FSHB CHAPTER 3.12.1](#). LEGAL PERMANENT RESIDENT ALIENS ADMITTED UNDER THE INA, WHO HAVE WORKED FOR 40 QUALIFYING QUARTERS ARE ELIGIBLE. WORKERS MAY FIND WORK QUARTER INFORMATION THROUGH CARES DATA EXCHANGE SCREENS. TO VERIFY ALIEN'S WORK QUARTERS INFORMATION YOU CAN REQUEST IT IN CARES ON DXQR. 48 HRS LATER IT WILL BE AVAILABLE ON DXQC. ONCE VERIFIED, THEN UPDATE ANAR WITH THE APPROPRIATE VERIFICATION CODE. REFERENCE [FSHB CHAPTER 3.12.1.3](#) FOR DEFINITION OF QUALIFYING WORK QUARTERS AND REMEMBER THAT CHILDREN CAN USE THEIR PARENTS WORK QUARTERS AS LONG AS THEY WERE RECEIVED PRIOR TO THE CHILD'S 18TH BIRTHDAY. [Reference FSHB Chap. 3.12.1](#)

MINORS, 18-YEAR OLDS, STUDENTS

- 020503 INCOME EARNED BY MINOR CHILDREN IS DISREGARDED IF THE MINOR IS ENROLLED IN SCHOOL (ELEMENTARY/HIGH SCHOOL/TECHNICAL/APPROVED HOME SCHOOLING AND/OR GED CLASSES). THIS MEANS THAT SCHOOL ENROLLMENT VERIFICATION IS NECESSARY FOR EMPLOYED STUDENTS UNDER THE AGE OF 18. A "?" ON ANSE IN THE VERIFICATION FIELD OF ENROLLMENT STATUS WILL PEND THE FS CASE. IF NV/QV IS ENTERED IN THIS FIELD, THE MINOR'S EARNED INCOME WILL BE COUNTED FOR FS. [Reference FSHB Chap. 3.15.1 and 4.3.2.2](#)
- 101701 WHEN A WORKER RECEIVES AN ALERT THAT A CHILD WILL BE TURNING 18, BE SURE TO CHECK THE FSET AND ABAWD STATUS OF THIS CHILD AND OTHERS IN THE HOUSEHOLD. IF THE 18 YEAR OLD IS EMPLOYED, VERIFY INCOME AND ENTER ON AFEI BEFORE ADVERSE ACTION IN THE MONTH THE CHILD TURNS 18. [Reference FSHB Chap. 4.3.2.2](#)
- 062001 IF A STUDENT IS ATTENDING AN INSTITUTE OF HIGHER EDUCATION, CODE THE STUDENT AS "IH" ON SCREEN ANSE. CARES USES THE "IH" CODE TO DETERMINE STUDENT ELIGIBILITY FOR FOODSHARE. [Reference FSHB Chap. 3.15.1 and 4.3.2.2](#)

SMRF PROCESSING

- 100604 ALL EARNED AND UNEARNED INCOME MUST BE VERIFIED AND UPDATED IN CARES WHEN A SMRF IS PROCESSED WHETHER OR NOT A CHANGE HAS BEEN REPORTED! FOR EXAMPLE, CHILD SUPPORT MUST BE RE-AVERAGED BY ACCESSING KIDS WHEN A SMRF IS SUBMITTED. THE EXCEPTION IS SELF-EMPLOYMENT. SELF-EMPLOYMENT SHOULD ONLY BE UPDATED AND VERIFICATION SHOULD ONLY BE REQUESTED IF A CHANGE IS REPORTED. [Reference OPS MEMO 04-27, PAGE 8.](#)
- 082504 WHILE THE SMRF INSTRUCTS THE CUSTOMER TO PROVIDE PROOF OF THE INCOME FOR THE CHANGE MONTH, AND THAT PROOF IS DESCRIBED AS PAYSTUBS FROM THAT MONTH OR A SIGNED EMPLOYER STATEMENT OF THAT MONTH'S INCOME, THE ESS MAY USE OTHER FORMS OF VERIFICATION TO DETERMINE THE PROSPECTIVE INCOME AS ALWAYS. ALL THE RULES AS DESCRIBED IN OPERATIONS MEMOS AND SUBSEQUENT RELEASES ON PROSPECTIVE BUDGETING ALSO APPLY FOR SMRF BUDGETING. REMEMBER THAT WE ARE LOOKING AT A PROSPECTIVE ESTIMATE OF INCOME SO IF PAST CHECKSTUBS DO NOT REFLECT THIS OTHER FORMS OF VERIFICATION ARE NECESSARY. [Reference FSHB Chap. 8.3.4.3 and OPS MEMO 04-27.](#)
- 072804 REMEMBER THAT EARNED AND UNEARNED INCOME (EXCEPT PREVIOUSLY VERIFIED ONGOING SELF-EMPLOYMENT INCOME) MUST BE VERIFIED AND UPDATED WITH CURRENT AMOUNTS WHEN PROCESSING A SMRF, EVEN IF NO CHANGE IN THE INCOME IS REPORTED. ENTER THE CURRENT DATE AND WAGE INFORMATION ON AFEI AND AFWG. UPDATE THE BEGIN MMY AND ENTER THE VERIFIED CURRENT INCOME FOR UC, CHILD SUPPORT, AND OTHER UNEARNED INCOME AMOUNTS ON AFUI. DO NOT CONFIRM MONTH 7 BENEFITS UNTIL ALL REPORTED INCOME AND ANY OTHER REPORTED CHANGES HAVE BEEN VERIFIED WITH APPROPRIATE VERIFICATION (SUCH AS CURRENT PAY STUBS, DATA EXCHANGE, KIDS, LEASE, UTILITY BILLS). [Reference FSHB Chap. 8.3.4.3 and OPS MEMO 04-27](#)

WAGES AND SALARIES INCOME BUDGETING

- 101904 CARES DOES NOT AUTOMATICALLY CONFIRM A CASE WHEN INCOME IS AUTO-POPULATED ON AFEI/AFWG. WHEN INCOME IS AUTO-POPULATED THE WORKER WILL RECEIVE ALERT #357 - VERIF DATA AUTOPOPULATED. THE WORKER SHOULD TRAN TO AFEI TO CHECK THE DATA THEN RUN ELIGIBILITY AND CONFIRM THE CASE SO THIS NEW INFORMATION IS USED IN THE FOODSHARE BUDGET. CMEV HAS BEEN CREATED AS A TOOL TO MONITOR EMPLOYMENT VERIFICATIONS. A CASE WITH AUTO-POPULATED INCOME WILL APPEAR ON CMEV AS A REMINDER THIS CASE MUST BE CONFIRMED BEFORE THE INCOME IS COUNTED IN THE BUDGET. [Reference FSHB Chap. 8.3.4.4 and Operations Memo 04-38](#)
- 091504 TO COMPLETE AFWG, IN MOST CASES THE WORKER ONLY NEEDS TO ENTER AN HOURLY RATE OF PAY, A PAY TYPE, AND AN AVERAGE NUMBER OF WORK HOURS PER PAY PERIOD. WHEN HOURS AND WAGES ARE ENTERED ON AFWG, CARES WILL CORRECTLY DETERMINE THE MEDICAL ASSISTANCE INCOME WITHOUT CONVERTING INCOME AND WILL CORRECTLY CONVERT THE INCOME FOR FOODSHARE. [Reference FSHB Chap. 8.3.4.4 and Operations Memo 03-39](#)
- 051004 PAY FREQUENCY IS VERY IMPORTANT IN DETERMINING A CORRECT PROSPECTIVE ESTIMATE OF INCOME. IF YOU ARE UNABLE TO DETERMINE PAY FREQUENCY BASED ON PAYCHECKS, AN EMPLOYER VERIFICATION FORM OR OTHER COLLATERAL CONTACT MAY NEED TO BE MADE TO MAKE A CORRECT DETERMINATION OF PAY. WITH THE AFWG SCREEN, CARES WILL USE THE PAY FREQUENCY LISTED ON AFEI AND APPLY THE CORRECT CONVERSION FACTOR, 2, 2.15 OR 4.3. [Reference FSHB Chap. 8.3.4.4 and Operations Memo 03-39](#)
- 033104 THIS IS A REMINDER THAT WORKERS DETERMINING ELIGIBILITY FOR FOODSHARE NEED TO REQUEST AND VERIFY PROSPECTIVE INCOME. IF THE PAST 30 DAYS IS NOT A PROJECTION OF FUTURE MONTHS INCOME, ADDITIONAL VERIFICATION MAY NEED TO BE REQUESTED. WORKERS SHOULD PAY SPECIAL ATTENTION TO RATE OF PAY AND HOURS ON PAYCHECKS PROVIDED BY CUSTOMERS. IF THE LAST 30 DAYS IS REPRESENTATIVE OF THE FUTURE AND IS NOT PROVIDED BY THE CLIENT, ENTER A? ON CARES SCREEN AFWG AND BE SURE TO PROVIDE THE CUSTOMER WITH THE VERIFICATION CHECKLIST. ONE PAYCHECK IS NOT GENERALLY SUFFICIENT VERIFICATION OF A PROJECTION OF INCOME. [Reference FSHB Chap. 8.3.4.3](#)
- 030304 THIS IS A REMINDER TO ES WORKERS THAT HAVE CLIENTS EMPLOYED BY SCHOOL SYSTEMS. PLEASE REMEMBER TO ASK THE CLIENT IF THEY ARE AN HOURLY OR CONTRACTUAL EMPLOYEE. PAYSTUBS MAY NOT INDICATE THIS AND CARES DOES NOT CURRENTLY HAVE A QUESTION TO REMIND WORKERS TO ASK THIS. THIS IS PARTICULARLY TRUE IN MILWAUKEE COUNTY SINCE MILWAUKEE PUBLIC SCHOOLS HIRE BOTH HOURLY AND CONTRACTUAL EMPLOYEES. THE STATE HAS HAD ERRORS RELATED TO INCORRECT BUDGETING OF INCOME WHEN A CLIENT IS PAID VIA YEARLY CONTRACT RATHER THAN AN HOURLY WAGE. [Reference FSHB Chap. 4.3.2.1](#)
- 052803 A WORKER MUST GATHER, AT A MINIMUM, VERIFICATION OF THE LAST 30 DAYS OF INCOME TO DETERMINE A PROSPECTIVE ESTIMATE. IF THE LAST 30 DAYS OF INCOME IS NOT INDICATIVE OF WHAT IS EXPECTED TO BE RECIEVED, THIS MUST BE DOCUMENTED AND FURTHER VERIFICATION GATHERED. REMEMBER TO ENTER YOUR REASONING ON AFDE AND/OR ACCC. [Reference FSHB Chap. 1.2.4.2 and 8.3.4.3](#)

- 051403 THERE ARE A NUMBER OF STEPS NEEDED WHEN MAKING A CHANGE TO AN INCOME SCREEN. FOR EXAMPLE, IF A CLIENT REPORTS THE LOSS OF A JOB, INFORMATION WILL NEED TO BE ENTERED ON AFEI FOR THE LAST DATE OF EMPLOYMENT, LAST PAY DATE AND THE AMOUNT OF THE MONTHLY INCOME DURING THE MONTH OF THE LOSS OF EMPLOYMENT. (REMEMBER THAT ACTUAL INCOME CAN BE USED WHEN A SOURCE OF INCOME IS BEGINNING OR ENDING AND A FULL MONTH'S INCOME IS NOT EXPECTED TO BE RECEIVED). BE SURE TO INVESTIGATE UNEMPLOYMENT BENEFITS AND VOLUNTARY QUIT, WHERE APPLICABLE. [Reference FSHB Chap. 8.3.4.1](#)
- 043003 IT IS VERY IMPORTANT DURING THE INVESTIGATIVE INTERVIEW TO ASK THE CLIENT WHETHER THE INCOME FROM THE PREVIOUS 30 DAYS IS THE INCOME THAT IS EXPECTED TO BE RECEIVED IN FUTURE MONTHS. THE PREVIOUS 30 DAYS MAY NOT INCLUDE A RATE OF PAY INCREASE OR A CHANGE IN HOURS. THE CURRENT RATE OF PAY IS WHAT IS TO BE USED DURING ANY CONVERSION OF INCOME. IF THE PAYSTUBS FROM THE LAST 30 DAYS DO NOT VERIFY THE CURRENT THIS RATE OF PAY, FURTHER VERIFICATION IS NEEDED. [Reference FSHB Chap. 8.3.4.3](#)
- 021903 IT IS VERY IMPORTANT TO PAY CLOSE ATTENTION TO CLIENT'S PAY-STUBS. MANY CLIENTS RECEIVE SHIFT DIFFERENTIALS, OVER-TIME AND/OR BONUS PAY. WORKERS MUST REMEMBER TO INVESTIGATE ALL ADDITIONAL PAY AND DETERMINE WHETHER IT SHOULD BE INCLUDED IN THE MONTHLY AVERAGE. IT MAY BE NECESSARY TO AVERAGE GROSS PAY VS SIMPLY LOOKING AT AVERAGING HOURS TIMES RATE OF PAY IN ORDER TO INCLUDE THESE ADDITIONAL PAY DIFFERENCES. REMEMBER TO ALWAYS DOCUMENT WHY YOU BUDGETED SOMETHING AND STOP ON EEIE TO LOOK AT BUDGETS PRIOR TO ANY CONFIRMATION OF BENEFITS. [Reference FSHB Chap. 8.3.4.3](#)
- 020503 INCOME EARNED BY MINOR CHILDREN IS DISREGARDED IF THE MINOR IS ENROLLED IN SCHOOL (ELEMENTARY/HIGH SCHOOL/TECHNICAL/APPROVED HOME SCHOOLING AND/OR GED CLASSES). THIS MEANS THAT SCHOOL ENROLLMENT VERIFICATION MAY BE NECESSARY FOR EMPLOYED STUDENTS UNDER THE AGE OF 18. A "?" ON ANSE IN THE VERIFICATION FIELD OF ENROLLMENT STATUS WILL PEND THE FS CASE. IF NV/QV IS ENTERED IN THIS FIELD, THE MINOR'S EARNED INCOME WILL BE COUNTED FOR FS. [Reference FSHB Chap. 3.15.1](#)
- 050901 MAKE SURE TO NOTE THE DATE A CHECK IS RECEIVED BY A CUSTOMER IF IT DIFFERS FROM THE DATE THAT APPEARS ON THE CHECK STUB. THIS WILL ENSURE THAT YOU ARE USING THE MOST RECENT CHECK STUBS IN YOUR PROSPECTIVE ESTIMATE AS WELL AS ESTABLISHING THE PAY SCHEDULE. [Reference FSHB Chap. 8.3.4.3](#)
- 021600 TO AVOID FOODSHARE BENEFIT ERRORS, WORKERS MUST DOCUMENT HOW PROSPECTIVE ESTIMATES OF EARNED INCOME WERE DERIVED. MANY WORKERS USED THE ADDRESS FIELDS OF EMPLOYERS ON AFEI TO SHOW THEIR MATH CALCULATIONS. THAT IS NOT CORRECT. WE ADDED 3 COMMENT LINES ON THE AFEI DETAIL SCREEN AFDE FOR THIS PURPOSE. MAKE SURE THE CORRECT EMPLOYER'S ADDRESS IS LISTED ON AFEI AND THAT THE MATH CALCULATIONS AND NOTES ARE LISTED EITHER ON THE TEXT LINES ON AFDE OR ON CMCC. [Reference FSHB Chap. 8.3.4.4](#)

SELF-EMPLOYMENT INCOME BUDGETING

042501 INCOME RECEIVED BY AN FS RECIPIENT WHO IS A CHILDCARE PROVIDER IS CONSIDERED SELF EMPLOYMENT INCOME IF THE FS RECIPIENT PROVIDES CHILDCARE IN THEIR OWN HOME. IF THE CHILDCARE IS PROVIDED IN THE CHILD'S HOME, THE INCOME OF THE FS RECIPIENT SHOULD BE BUDGETED AS REGULAR EARNED INCOME. [Reference FSHB Chap. 4.3.3.](#)

062200 IF A CLIENT IS SELF-EMPLOYED AND IF THE BUSINESS HAS BEEN IN OPERATION FOR MORE THAN 1 MONTH, BUT LESS THAN 6, DETERMINE THE INITIAL ANTICIPATED INCOME USING SEIRFS FOR THE MONTHS THE BUSINESS HAS BEEN IN OPERATION TO CALCULATE THE AVERAGE. THE CUSTOMER WILL THEN SUBMIT A NEW SEIRF EACH MONTH UNTIL A 6-MONTH PERIOD HAS BEEN REPORTED. EACH MONTH A SEIRF IS SUBMITTED, RECALCULATE THE AVERAGE. [Reference FSHB Chap. 4.3.3.](#)

UNEARNED INCOME BUDGETING

081104 TO CORRECTLY BUDGET CHILD SUPPORT INCOME, THE WORKER MUST DETERMINE WHAT DEBTS THE PAYMENTS ARE APPLIED TO IN ORDER TO KNOW IF THEY SHOULD BE INCLUDED IN THE INCOME ESTIMATE AND FOR WHOM THE INCOME SHOULD BE BUDGETED. A BEST PRACTICE IS TO USE THE DISBURSEMENT SUMMARY SCREEN (02, 05, 16) TO SEE ALL THE PAYMENTS THE COURT ORDERED PAYEE RECEIVES AND THE COURT CASES THEY ARE ASSOCIATED WITH. THEN QUERY THE CASE ACCOUNT STATEMENT (02, 05, 06) FOR EACH CASE TO SEE WHAT DEBTS THE PAYMENT WAS APPLIED TO (CURRENT CHILD SUPPORT, ARREARS, SPOUSAL SUPPORT, MEDICAL EXPENSES, ETC). YOU WILL ALSO BE ABLE TO SEE IF A PAYMENT WAS MADE THROUGH INCOME WITHHOLDING, UC, DIRECTLY FROM THE PAYER OR TAX INTERCEPT. [Reference FSHB Chap. 8.3.7](#)

071404 WHEN DETERMINING THE PROSPECTIVE CHILD SUPPORT INCOME, WORKERS MUST DECIDE WHETHER OR NOT TO INCLUDE ARREARAGE PAYMENTS. IF THE ARREARS PAYMENTS ARE BEING RECEIVED IN A REGULAR AND PREDICTABLE PATTERN, IT IS APPROPRIATE TO INCLUDE THOSE PAYMENTS IN THE BUDGET. IF NOT, THEY MUST BE DISREGARDED. ARREARS AND CURRENT SUPPORT ARE COMBINED ON THE SAME CSCC SCREEN. THE DECISION TO INCLUDE OR DISREGARD THE ARREARS PAYMENTS MUST BE WELL DOCUMENTED IN CASE COMMENTS. [Reference FSHB Chap. 8.3.7](#)

061604 WHEN CALCULATING CHILD SUPPORT INCOME (AFUI), IT IS A BEST PRACTICE TO AVERAGE THE CHILD SUPPORT PAID IN THE 3 MONTHS PRIOR TO THE REVIEW MONTH. IN SOME CIRCUMSTANCES YOU MAY NEED TO USE MORE OR LESS THAN 3 MONTHS. WHEN MAKING THE PROSPECTIVE ESTIMATE, CONSIDER CHANGES THAT HAVE OCCURRED. FOR EXAMPLE, HAS THE COURT ORDERED AMOUNT OF SUPPORT CHANGED? DID THE CHILD SUPPORT PAYMENTS JUST BEGIN OR END? BE SURE TO DOCUMENT WHAT PAYMENTS YOU USED AND WHY. [Reference FSHB Chap. 4.3.4 and 8.3.7](#)

041603 DISREGARD REPAYMENTS (NOT DUE TO A FS IPV) FROM BENEFITS PAYABLE TO THE FS GROUP. THESE INCLUDE ITEMS PAID OUT OF POCKET TO REPAY A PRIOR NON-MEANS TESTED OVERPAYMENT RECEIVED FROM THAT SOURCE. UNEMPLOYMENT COMPENSATION IS CONSIDERED A NON-MEANS TESTED PROGRAM. FOR EXAMPLE, PAO RECEIVES FS AND UNEMPLOYMENT COMPENSATION (UC). UC IS NOT A MEANS TESTED PROGRAM. PAO HAD AN OVERPAYMENT IN HIS UC AND \$25 IS BEING RECOUPED IN HIS CURRENT CHECKS. HIS GROSS IS \$500 AND HIS NET IS \$475. SINCE UC IS NOT A MEANS TESTED PROGRAM, BUDGET THE NET \$475 AS INCOME FOR FS. THIS DOES NOT INCLUDE CS THAT IS WITHHELD FROM WEEKLY UC PAYMENTS. WE WOULD COUNT THE GROSS UC ON AFUI AND BUDGET THE CS PAID OUT ON AFSP IN THOSE CASES. [Reference FSHB Chap. 4.5.6.4](#)

05 02 02 TRIBAL PER CAPITA PAYMENTS ARE BUDGETED AS UNEARNED INCOME AND PRORATED OVER THE TIME PERIOD INTENDED. REFER TO PROGRAM MANUALS FOR THE POLICY ON HOW TO BUDGET THIS INCOME FOR OTHER PROGRAMS. [Reference FSHB Chap. 4.3.4.1](#)

03 20 02 WHEN AN INDIVIDUAL'S UNEMPLOYMENT COMPENSATION (UC) BENEFITS ARE DISCONTINUED, END DATE THE UC SCREEN ON AFUI. THE WORKER WILL NEED TO RERUN ELIGIBILITY IN THE MONTH FOLLOWING THE MONTH THE UC ENDED. BARRING ANY OTHER EXEMPTION REASON, THE INDIVIDUAL WILL THEN SHOW AS MANDATORY ON AIWP AND CAN BE REFERRED FOR FSET. FOR EXAMPLE: UC ENDS IN MARCH AND THE WORKER ENTERS THE EFFECTIVE BEGIN AND END MONTH OF 03/02 ON AFUI. THE WORKER RERUNS ELIGIBILITY ON OR AFTER APRIL 1, AND THE INDIVIDUAL IS REFERRED FOR FSET IN APRIL. USE ACEC TO SEND A REMINDER TO RERUN ELIGIBILITY FOR THE MONTH AFTER UC HAS ENDED IN ORDER TO GET THE FSET REFERRAL. [Reference FSHB Chap. 3.16.1 and FSET Manual 04.04.00.](#)

092000 TO VERIFY CHILD SUPPORT INCOME RECEIVED, USE THE KIDS DISBURSEMENT SUMMARY SCREEN, FAST PATH 02-05-16, WHICH SUPPLIES THE FOLLOWING INFORMATION: PRINT DATE OF CHECK, CHECK/EFT #, COURT CASE NUMBER, AND AMOUNT OF THE CHECK THAT IS SENT TO THE CUSTODIAL PARENT. EACH KIDS CASE IS ASSIGNED A COURT CASE NUMBER SO BE SURE TO CALCULATE SUPPORT CORRECTLY FOR EACH COURT CASE NUMBER/CHILD. CONVERT OR AVERAGE THE INCOME TO DETERMINE THE PROSPECTIVE AMOUNT. IT IS IMPORTANT THAT YOU DOCUMENT IN CASE COMMENTS THAT YOU GOT YOUR INFORMATION FROM KIDS AND HOW YOU COMPUTED THE AMOUNT THAT YOU ARE BUDGETING. [Reference FSHB Chap. 8.3.7](#)

DEDUCTIONS

121703 THIS IS A REMINDER THAT CERTAIN CHILD SUPPORT EXPENSES ARE NOT ALLOWED OR COUNTED IN THE MONTHLY PAYMENT AMOUNT OF COURT ORDERED SUPPORT PAID BY AN NCP TO A NON-HOUSEHOLD MEMBER. DO NOT ALLOW 1) MAINTENANCE, 2) PAYMENTS MADE IN ACCORDANCE WITH A PROPERTY SETTLEMENT, 3) LYING-IN COSTS FOR THE BIRTH OF A CHILD, 4) THE ANNUAL CHILD SUPPORT R&D FEE AND 5) AN EMPLOYER'S CHECK WITHHOLDING FEE. ESS WORKERS MAY NEED TO LOOK IN KIDS AT 02, 05, 05 AND CHOOSE EACH CHECK TO SEE HOW IT IS APPLIED OR 02, 05, 06 THAT OUTLINES UNDER EACH COLUMN HOW A PAYMENT IS DISBURSED. [Reference FSHB Chap. 4.6.5.2](#)

- 111903 DEDUCT CHILD SUPPORT FOR FS HOUSEHOLDS THAT PAY COURT ORDERED CHILD SUPPORT TO OR FOR A NON-HOUSEHOLD MEMBER. DETERMINE THE DEDUCTION AMOUNT BY EITHER: 1) THE AVERAGE CHILD SUPPORT PAID IN THE PREVIOUS 6 MONTHS OR 2) THE AVERAGE CHILD SUPPORT PAID DURING THE CERTIFICATION PERIOD, BASED ON A RECORD OF PAYMENT. THIS WOULD INCLUDE ANY TAX INTERCEPTS PAID BY THE NCP. [Reference FSHB Chap. 8.3.8](#)
- 031903 ELDERLY, BLIND OR DISABLED (EBD) FS GROUP MEMBERS ARE ALLOWED TO CLAIM EXCESS MEDICAL EXPENSES. IF AN EBD RECIPIENT HAS AN MA DEDUCTIBLE, AND THE DEDUCTIBLE IS MET BY PREPAYMENT OR A ONE-TIME INCURRED MEDICAL EXPENSE, THEN THE EXPENSE USED TO MEET THE MA DEDUCTIBLE CAN BE USED AS AN ALLOWABLE FS EXPENSE. THERE ARE A NUMBER OF WAYS TO BUDGET THIS EXPENSE, AVERAGING OVER THE FS CERT. PERIOD, MA CERT. PERIOD, PAYMENT PLAN ARRANGEMENTS OR A ONE-TIME LUMP EXPENSE. MOST EXPENSES ARE ENTERED ON AFME. BE SURE TO ALWAYS STOP ON EEIE TO CHECK BUDGETS. [Reference FSHB Chap. 4.6.4 and 8.3.8](#)
- 11 13 02 ALLOW FS GROUPS SHARING BOTH UTILITY EXPENSES AND A RESIDENCE THE FULL UTILITY STANDARD. UTILITY STANDARDS ARE NO LONGER PRORATED. IT DOESN'T MATTER WHICH GROUP RECEIVES THE BILL. IT ALSO DOESN'T MATTER IF THE SHARED UTILITIES AND RESIDENCE ARE WITH ANOTHER FS GROUP OR WITH A NON-ELIGIBLE MEMBERS. YOU MUST RECEIVE VERIFICATION OF THE EXPENSE AMOUNT, IDENTIFY CONTRIBUTORS, AND ENTER EACH ONE SEPARATELY IN CARES. IF AT LEAST ONE FS AG MEMBER IS OBLIGATED TO PAY FOR OR ACTUALLY PAYS FOR A UTILITY BILL, THE FS AG WILL RECEIVE THE FULL UTILITY STANDARD. [Reference FSHB Chap. 4.6.7.3](#)
- 06 26 02 IF A FOODSHARE GROUP WITH SELF EMPLOYMENT USES A PORTION OF THEIR SHELTER COST FOR A BUSINESS EXPENSE, DO NOT ALLOW THAT PORTION AS A SHELTER EXPENSE ON AFSC. [Reference FSHB Chap. 4.6.7](#)
- 06 12 02 THE 'OBLIGATION AMOUNT' FIELD ON AFSC AND AFUC SHOULD BE COMPLETED WITH THE MONTHLY AMOUNT THE INDIVIDUAL IS OBLIGATED TO PAY. THAT IS THE AMOUNT CARES WILL USE IN THE SHELTER AND UTILITY COSTS FOR THE FOODSHARE DETERMINATION, UNLESS A STANDARD UTILITY ALLOWANCE HAS BEEN CHOSEN. [Reference FSHB Chap. 8.3.8](#)
- 04 03 02 MEDICAL INSURANCE PREMIUM EXPENSE ENTERED ON AFMC IS ONLY PULLED INTO THE FS BUDGET IF THE INDIVIDUAL THAT IS COVERED UNDER THE POLICY IS ELDERLY, BLIND OR DISABLED. THE SHORTLIST NUMBER OF THAT INDIVIDUAL MUST BE LISTED ON AFMI AS BEING COVERED BY THE INSURANCE POLICY OR CARES WILL NOT BUDGET THE PREMIUM AMOUNT. [Reference FSHB Chap. 8.3.8](#)
- 082901 CHANGES IN SHELTER EXPENSES DO NOT HAVE TO BE REPORTED UNTIL REVIEW. HOWEVER, THE WORKER MUST ACT UPON ANY REPORTED CHANGE. [Reference FSHB Chap. 8.3.12](#)
- 082201 ONE TIME VERIFIED MEDICAL EXPENSES MAY ONLY BE USED ONCE AND ONLY IN THE FOLLOWING WAYS: AS A ONE TIME DEDUCTION; AVERAGED OVER THE FOODSHARE CERTIFICATION PERIOD; ACCORDING TO A NEGOTIATED PAYMENT SCHEDULE; OR OVER THE PERIOD IT WAS INTENDED TO COVER, AS IN MEETING MA DEDUCTIBLES. [Reference FSHB Chap. 4.6.4.3](#)

- 072501 IF PROPERTY TAXES AND INSURANCE EXPENSES ARE INCLUDED IN THE MORTGAGE PAYMENT, ENTER THE TOTAL AS A MORTGAGE PAYMENT. IF THE PROPERTY TAXES AND INSURANCE PAYMENTS ARE NOT INCLUDED IN THE MORTGAGE PAYMENT, REQUEST VERIFICATION OF THE PROPERTY TAXES AND INSURANCE PAYMENTS. PRORATE THE EXPENSES TO A MONTHLY AMOUNT AND ENTER THEM TO SCREEN AFSC. [Reference FSHB Chap. 4.6.7.1 and 8.3.8](#)
- 062800 ALLOWABLE SHELTER EXPENSES INCLUDE INSURANCE ON THE STRUCTURE BUT NOT ON FURNITURE OR PERSONAL BELONGINGS. THEREFORE, ALTHOUGH HOMEOWNER'S INSURANCE IS ALLOWABLE, RENTER'S INSURANCE WOULD NOT BE AN ALLOWABLE EXPENSE WHEN DETERMINING THE SHELTER DEDUCTION. [Reference FSHB Chap. 4.6.7.1 and 8.3.8](#)
- 053100 FS GROUPS RECEIVE SHELTER AND UTILITY EXPENSE DEDUCTIONS IF ANYONE IN THE GROUP IS OBLIGATED TO PAY THE BILL. THIS MEANS THAT EVEN IF THEY DON'T PAY THE BILL, THE AG SHOULD GET THE DEDUCTION. [Reference FSHB Chap. 4.6.7 and 8.3.8](#)
- 040500 IF A RECIPIENT OF MEDICARE IS ON SELF PAY, BE SURE TO PUT THE NET SSDI AMOUNT ON AFUI AND COMPLETE THE AFMD SCREEN SHOWING SELF-PAY. CARES WILL ADD THE MEDICARE PREMIUM ON AFMD BACK WITH THE NET AMOUNT ON AFUI. [Reference FSHB Chap. 8.3.8](#)

FSET/VQT

- 052103 A VOLUNTARY JOB QUIT (VQ) OCCURS WHEN A FS GROUP MEMBER, OR FS APPLICANT, MEETS THE CRITERIA OUTLINED IN THE FSET MANUAL IN CHAPTER 5, 5.5.1. IT IS VERY IMPORTANT TO REMEMBER THAT IN ORDER TO APPLY THE VOLUNTARY QUIT POLICY, THE PERSON WOULD HAVE TO BE, OR WOULD BE, A MANDATORY PARTICIPANT IN FSET. THIS IS JUST ONE OF SEVERAL CRITERIA. [Reference Chapter 5.5.3 of the FSET Manual](#)
- 120501 IF A VOLUNTARY QUIT SANCTION IS APPLIED TO AN INDIVIDUAL WHO DOES NOT MEET ALL OF THE VQ CRITERIA, AN AGENCY PREVENTABLE ERROR (APE) MAY BE CALLED IN A STATE QA REVIEW. [Reference Chapter 5.5.1 of the FSET Manual to review the VQ criteria.](#)
- 112801 NO SANCTION IS IMPOSED IF AN INDIVIDUAL COMPLIES WITH FSET REQUIREMENTS OR BECOMES FSET EXEMPT DURING THE PENDING SANCTION PERIOD. THIS RULE APPLIES TO BOTH INDIVIDUALS WHO FAILED TO ENROLL AND THOSE WHO ENROLLED BUT FAILED TO PARTICIPATE. [Reference FSET Manual 5.3.0](#)
- 111601 IT IS IMPORTANT TO ASK AND ANSWER THE QUESTION ON AFEQ THAT ASKS "HAS ANYONE IN THE HOUSE BEEN PREVIOUSLY SANCTIONED FOR FSET AND IS NOW REQUESTING FS BENEFITS?" THIS WILL ENSURE THAT A SANCTIONED PERSON IS GIVEN THE CHANCE TO RE-REQUEST FOODSHARE AND WILL BRING UP THE APPROPRIATE SCREEN TO ENTER THE RE-REQUEST DATE. [Reference FSET Manual 5.4.0](#)

- 061301 IT IS THE CUSTOMER'S RESPONSIBILITY TO INITIATE THE REQUEST TO BE ADDED BACK TO THE FS GROUP FOLLOWING A VOLUNTARY QUIT SANCTION. THEY ARE ADDED BACK THE FIRST OF THE MONTH FOLLOWING THE END PERIOD OF INELIGIBILITY OR THE FIRST OF THE MONTH FOLLOWING THEIR REQUEST TO BE ADDED BACK TO THE FS GROUP, WHICHEVER IS LATER. THE WORKER COMPLETES THE RE-REQUEST ON SCREEN AFLE. THIS POLICY IS ALSO TRUE FOR FSET SANCTIONS. [Reference FSHB Chap. 6.1.3.3 and FSET Manual 5.4.0](#)
- 040401 A CUSTOMER WHO CLAIMS TO BE PHYSICALLY OR MENTALLY INCAPABLE OF EMPLOYMENT SHOULD NOT BE REFERRED TO THE FSET PROGRAM UNTIL THE FS WORKER DECIDES TO REJECT THE CLAIM. [Reference FSHB Chap. 8.3.1.2 and FSET Manual 4.4.0 #8](#)
- 033000 IF SOMEONE IS ONLY INCAPACITATED FROM THE FSET PROGRAM, THEN A "Y" SHOULD BE ENTERED ONLY ON THE BOTTOM LINE ON ANDI, "IS THIS PERSON INCAPABLE OF GAINFUL EMPLOYMENT?" IF A "Y" IS ENTERED ON EITHER OF THE OTHER DISABILITY QUESTIONS, CARES WILL ALLOW EXCESS SHELTER COSTS, WHICH IS NOT CORRECT FOR INCAPACITATION. [Reference FSHB Chap. 8.3.1.2 and FSET Manual 4.4.0](#)
- 020300 IF SOMEONE IS INCAPACITATED (ANIC) BUT NOT DISABLED (ANDI) DON'T PUT A "Y" ON THE "FS DISABILITY" QUESTION ON ANDI BECAUSE IT MAY INCORRECTLY GIVE THEM AN UNCAPPED EXCESS SHELTER DEDUCTION. THE UNCAPPED EXCESS SHELTER DEDUCTION IS ONLY GIVEN TO AG'S WITH ELDERLY INDIVIDUALS OR THOSE FOUND DISABLED BY THE DISABILITY DETERMINATION BOARD. [Reference FSHB Chap. 8.3.1.2](#)
- 012700 A (Y) ENTRY IN THE "IS INDIVIDUAL INCAPABLE OF GAINFUL EMPLOYMENT?" FIELD ON ANDI WILL TRIGGER CARES TO GENERATE A FSET EXEMPTION CODE OF IG (INCAPABLE OF GAINFUL EMPLOYMENT) ON AIWP. CARES WILL NOT EXEMPT AN SSI/SSDI RECIPIENT FOR FSET UNLESS A (Y) HAS BEEN ENTERED IN THIS FIELD. SCREEN ANIC (INCAP SCREEN) WILL NOT EXEMPT INCAP INDIVIDUALS FROM FSET. [Reference FSHB Chap. 8.3.1.2](#)

CHANGES/DX CROSSMATCHES

- 030503 IT IS VERY IMPORTANT FOR WORKERS TO ACT ON ANY ALERTS AND CROSS MATCHES RELATED TO UNEMPLOYMENT BENEFITS. USE THE NEW UC SUMMARY SCREEN DXSU, ALONG WITH DXQB AND DXQU. ANY NEW RECEIPT OF UNEMPLOYMENT SHOULD BE ENTERED IN CARES ON AFUI PRIOR TO CUTOFF. BE SURE TO CONVERT APPROPRIATELY. [Reference 8.3.11 and Ops Memo 03-61](#)
- 112702 REQUESTS FOR VERIFICATION MUST BE MADE IN WRITING. VERBAL REQUESTS ARE NOT ACCEPTABLE AND WILL NOT STAND UP IN A FAIR HEARING. WORKERS ARE REQUIRED TO GIVE THE CUSTOMER NOTICE REGARDING REQUIRED VERIFICATION, WHEN IT IS DUE TO THE AGENCY, AND THE CONSEQUENCES OF NOT VERIFYING TIMELY. REMEMBER TO CHANGE SCREEN AGVC TO A "Y" FOR A NIGHTLY GENERATED NOTICE OR A 'P' FOR A LOCALLY PRINTED NOTICE. [Reference FSHB Chap. 1.2.1.2](#)

- 090502 THERE ARE INSTANCES WHEN CHANGES ARE REPORTED AND VERIFIED BETWEEN ADVERSE ACTION AND THE END OF A BENEFIT MONTH. ALL REPORTED CHANGES THAT CAUSE AN INCREASE IN THE FS BENEFIT ARE EFFECTIVE THE FIRST OF THE MONTH FOLLOWING THE REPORT MONTH IF REQUIRED VERIFICATIONS ARE RECEIVED WITHIN 10 DAYS OF THE REQUEST FOR VERIFICATION. UPON RECEIPT OF ADEQUATE VERIFICATION, DO NOT WAIT TO ISSUE A SUPPLEMENT FOR THE NEXT BENEFIT MONTH. QA IS ALLOWED TO CONSIDER A SUPPLEMENT IF IT IS ISSUED PRIOR TO THEIR STATE QA PULL DATE, OR IF IT IS ISSUED WITHIN 10 DAYS OF THE REPORTED CHANGE. [Reference FSHB Chap. 8.3.12](#)
- 052902 QUARTERLY WAGES REPORTED ON DXQW CANNOT BE USED TO DETERMINE AN INDIVIDUAL'S PROSPECTIVE EARNINGS. THESE WAGES DO NOT REFLECT THE MOST RECENT 30 DAYS OF EARNED INCOME. [Reference FSHB Chap. 8.3.4.3](#)
- 121901 AT THE TIME A CROSS-MATCH IS RECEIVED, THE WORKER/AGENCY ASSUMES THE RESPONSIBILITY FOR ACTING ON THAT CROSS-MATCH. PAYMENT ERRORS RESULTING FROM THE FAILURE TO ACT ON DATA EXCHANGE MATCHES MAY BE CALLED AN AGENCY-PREVENTABLE ERROR (APE). [Reference FSHB Chap. 6.1.3.1 and CARES Guide Chap. 10](#)
- 060601 WHEN A CUSTOMER HAS PROVIDED INFORMATION OR VERIFICATION BEFORE ADVERSE ACTION (CUTOFF), IT MUST BE ACTED ON PRIOR TO ADVERSE ACTION, EVEN IF OTHER UNVERIFIED INFORMATION EXISTS. THE CASE SHOULD PEND OVER ADVERSE ACTION ONLY FOR ANY UNVERIFIED INFORMATION. [Reference FSHB Chap. 6.1.3](#)
- 101100 WORKERS SHOULD CHECK & COMPLETE THEIR DATA EXCHANGE ALERTS ON A DAILY BASIS. EOS REPORT CD90 LISTS OVERDUE DATA EXCHANGE MATCHES INCLUDING "NEW HIRE" MATCHES. SUPERVISORS CAN CHECK CD90 TO MONITOR DATA EXCHANGE ACTIVITIES.
- 100400 TO ELIMINATE UNNECESSARY DXNH (NEW HIRE) MATCHES, ENTER THE FEDERAL IDENTIFICATION NUMBER (FEIN) OF THE EMPLOYER ON AFEI IF AVAILABLE. THIS CAN BE FOUND ON QUERY SCREEN AQEF. ALSO CHECK PAY STUBS FOR THE FEIN. [Reference Ops Memo 03-54.](#)

OVERPAYMENTS

- 032101 WHEN CALCULATING AN FS OVERPAYMENT, DO NOT APPY THE 20% EARNED INCOME DEDUCTION TO EARNED INCOME WHICH IS REPORTED UNTIMELY. [Reference FSHB Chap. 7.3.2.1](#)
- 031401 WHEN CALCULATING AN FS OVERPAYMENT DUE TO UNREPORTED OR UNDER-REPORTED INCOME USE THE ACTUAL INCOME FROM ALL SOURCES OF INCOME IN THE FS GROUP. DO NOT USE THE PROSPECTIVE INCOME ESTIMATE THAT WAS ORIGINALLY USED. [Reference FSHB Chap. 7.3.1.1](#)

MISCELLANEOUS

- 01 24 04 THIS IS JUST A REMINDER TO AGENCY STAFF THAT THE INTERNET SITE FOR INCOME MAINTENANCE IS AT <http://www.dhfs.state.wi.us/em/> THIS IS THE ELIGIBILITY MANAGEMENT HOME PAGE AND HAS A NUMBER OF LINKS RELATED TO IM PROGRAMS. PLEASE REMEMBER TO READ AND REVIEW OPS MEMOS AND HANDBOOK RELEASES FOR CHANGES IN POLICY.
- 10 16 02 AS A REMINDER TO SUPERVISORS AND/OR LEAD STAFF, BE SURE TO CHECK THE EOS "MASS CHANGE EXCEPTION LISTING" AFTER ADVERSE ACTION AND TAKE APPROPRIATE ACTION ON ALL CASES INCLUDING ANY CASES THAT WERE DUE FOR REVIEW AND DID NOT CLOSE. IF A REVIEW IS COMPLETED ON THESE CASES AFTER ADVERSE ACTION CHECK AGOR TO ENSURE THE CORRECT 6 OR 12 MONTH CERTIFICATION PERIOD WAS SET. **Reference FSHB Chap. 1.1.4**
- 050201 IT IS IMPORTANT TO DATE STAMP ALL VERIFICATION AND DOCUMENTS FILED IN THE RECORD OR WRITE THE DATE THE VERIFICATION WAS RECEIVED ON THE DOCUMENT.
- 020701 USE FRONT-END VERIFICATION AS A TOOL FOR ERROR REDUCTION. IF INFORMATION GIVEN DURING AN APPLICATION INTERVIEW IS QUESTIONABLE OR FITS THE ERROR-PRONE PROFILE OF YOUR AGENCY, REFER THE CASE FOR FRONT END VERIFICATION. USE THE SAME PROCESS IF INFORMATION ON A REPORTED CHANGE IS QUESTIONABLE. REMEMBER, CLIENT ERRORS ARE CALCULATED AS PART OF WISCONSIN'S ERROR RATE.